PATENT APPLICATION FEE DETERMINATION RECOR								Application or Docket Number 10042203					
	PAILMI A		ive Octob					Ľ	004				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN			
TO	TAL CLAIMS		47				R/	TE	FEE	Ì	RATE	FEE	
FOR			NUMBER FRED		NUMBER EXTRA		PAS	C FEE	370.00	ОЯ	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			47minus 20=		. 27		X	9=		OR	X\$18-	486	ľ
INDEPENDENT CLAIMS			7 minus 3 =		. 4		X	X42=		OR	X84=	396	
W	LTIPLE DEPEN	DENT CLAIM P	RESENT				1.1	.O=		OR	+280=	8	
· u	the difference	in column 1 is	less than ze	ero, ente	r "O" in o	olumn 2		TAL	-	OR		1562	
•		LAIMS AS A		- PAR	IT II	(Column 3)			ENTITY	OR	OTHER		
ENTA	·	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		PREVI	mn 2) REST RBER OUSLY POR	PRESENT EXTRA	R	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	. •
	Total	. 22	Minus	44	47	• /	X	92		OR	X\$18=		
	Independent	. 8	Minus	***	1	<u> </u>	X4	2=		OR	X86	36,00	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							40=:		OR	+280=		
						•	A901	OAL		OR	ADDIT, FEE		ŀ
,	5-16-05	(Column 1)		(Colu	ma 2) .	(Column 3)							
0		CLAIMS REMAINING AFTER AMENOMENT		NU PREV	HEST WBER YOUSLY O FOR	PRESENT EXTRA	R	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 34	Minus		47		X	9-		OR	X\$18=		
AMENDMENT	Independent	. 16	Minus	***	12	-4	×	*		OR	260 X	800	
_		ENTATION OF N					+1	40=		OR	+280=		
6	s, 134, 13 i, 134, 13	81,87,93	5, 110, 12	et jet.	, 141,	23		OTAL		OR	TOTAL ADDIT, FEE	800	1 /
13	, 12,1	(Column 1)	10/28/00	Col	umn 2)	(Column 3)		1 40					
MC		CLAHAS REMAINING AFTER AMENDMENT		NU PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA	R	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	· 33	Minus		41	•	X	9=		OR	X\$18=		
AMENDMENT	Independent	• 10	Minus		16	•	X	12=		OR	X84=		
۲	FIRST PRES	ENTATION OF I	WULTIPLE DE	PENDE	NT CLAIN		1.,	40=		OR	+280=	360	1

" If the entry in column 1 is less than the entry in column 2, write "of in column 3.

" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-075 (Rev. 8/01)

OR ADDIT. FEE

Pd.